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appropriate. All further con indicated unless corrected maintenance fee notification		in Block 1, by (a)	E FEE and lers and noti	a new corresp	ondence address;	and/or (b) indicating a sepa	arate "FEE ADDRESS" for	
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GROSSMAN & FLIGHT, LLC 20 N. WACKER DRIVE SUITE 4220 CHICAGO, IL 60606		NOV 1 9 2004		L I her State addr trans	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
11/22/2004 ZJUHAR2 00000044 09134981					Mark G	. Hanley	(Depositor's name)	
01 FC:2501 685.00 0P					Wal D. Haly (Signature)			
					Nowember 16, 2004 (Date)			
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/134,981	09/134,981 08/17/1998		DAVID A. GOLDMAN			H-409	8723	
TITLE OF INVENTION: AUTOMATICALLY GENERATING EMBROIDERY DESIGNS FROM A SCANNED IMAGE								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLIC	CATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional				T	\$0	\$665 1	12/17/2004	
EXAMINER		ART UNIT			-SUBCLASS]		
VO, TIM T		2112		700	137000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
SOFT SIGHT INC. Johnson City, NY								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🕱 Corporation or other private group entity 🚨 Government								
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):								
Issue Fee A check in the amount of the fee(s) is enclosed.								
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Authorized Signature	Wast	1. Hal				ovember 16,		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Hanley

11/22/2004 ZJUHAR2 00000044 09134981 01 FC 250 85 (Rev. 09/04) Approved for use 685 (10/04/80/2007.

Typed or printed name Mark G.

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